

Fill in this information to identify your case:

Debtor 1	ANTONICIA		HOLMES
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of Maryland			
Case number (If known)	25-14985		

USBC-MD 6 FILED
23 JUN '25 PM 1:09
☒ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your AssetsYour assets
Value of what you own1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$	749,000.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$	2,281,761.78
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$	3,030,761.78

Part 2: Summarize Your LiabilitiesYour liabilities
Amount you owe2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	355,889.00
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3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$	3,450.35
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+ \$	281,062.35

Your total liabilities	\$	640,401.70
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Part 3: Summarize Your Income and Expenses4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$	1,436.00
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5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$	9,342.00
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Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

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Middle Name

Last Name

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 1,436.00

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**Total claim**From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 3,450.35
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 214,392.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 217,842.35

Fill in this information to identify your case:

Debtor 1 ANTONICIA HOLMES
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) _____
 First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Maryland

Case number 25-14985
 (If known)

☒ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1 6008 SUZANNE ROAD

Street address, if available, or other description

WALDORF MD 20601-3201
 City State ZIP Code

CHARLES-MD
 County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

APN: 08037426; Book 11409, at Page 492

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**
 \$ 475,000.00 \$ 475,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

fee simple

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2 Westgate Vacation Villas Resort

Street address, if available, or other description

7700 Westgate Blvd

Kissimmee FL 34747
 City State ZIP Code

OSCEOLA-FL
 County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☒ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Phase XXIV; Book 1488, at Page 1068; VVA/01 / 40
 / ODD & VVA/01 / 47 / EVEN

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**
 \$ 274,000.00 \$ 274,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

fee simple

☐ Check if this is community property (see instructions)

Debtor 1 ANTONICIA

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Middle Name

Last Name

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. →

\$ 749,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1 Make: Honda
Model: Civic
Year: 2016
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 7,800.00 \$ 7,800.00

If you own or have more than one, describe here:

3.2 Make: Chevy
Model: Cruze HB
Year: 2018
Approximate mileage: 135000
Other information:

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 5,400.00 \$ 5,400.00

3.3 Make: Ford
Model: Focus
Year: 2010
Approximate mileage: 152000
Other information:

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 2,900.00 \$ 2,900.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

Debtor 1 ANTONICIA

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Middle Name

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Make: _____

Model _____

Year: _____

Other information:

Who has an interest in the property? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** **Current value of the portion you own?**

\$ _____ \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.



\$ 16,100.00

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

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First Name

Middle Name

Last Name

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe. Living Room set (2), Dining Room set (1), Bedroom Furniture (3), Beds (3), Dishes, Silverware set (1)

\$ 7,000.00

7. Electronics*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe. Printer (2), Laptop (1), Television (5), Cellphone (1)

\$ 850.00

8. Collectibles of value*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe.

\$

9. Equipment for sports and hobbies*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe.

\$

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.

\$

11. Clothes*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe. Everyday Clothes, everyday shoes, accessories

\$ 1,000.00

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☒ No☐ Yes. Describe.

\$

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

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First Name

Middle Name

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13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No☐ Yes. Describe.

\$ _____

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No☐ Yes. Give specific
information.

\$ _____

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here. →

\$ 8,850.00

Debtor 1 ANTONICIA HOLMES
 First Name Middle Name Last Name

Case number (if known) 25-14985

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?
Do not deduct secured claims
or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes Cash: \$

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes..... Institution name:

17.1	Checking account:	<u>Relay Financial</u>	\$	<u>31.00</u>
17.2	Checking account:	<u>Charles Schwab</u>	\$	<u>25.00</u>
17.3	Checking account:	<u>Sutton Bank / Cashapp</u>	\$	<u>52.00</u>

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes..... Institution or issuer name: \$

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☐ No

☒ Yes. Give specific information about them Name of entity: % of ownership:

<u>The Rujalan Group, LLC</u>	<u>100 %</u>	\$	<u>100.00</u>
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20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☐ No

☒ Yes. Give specific information about them Issuer name:

<u>First Home Mortgage Corp., Security Instrument (Note) - (MINS 1000915-0000242402-3)</u>	\$	<u>565,741.65</u>
<u>Capital One Auto Finance (Note -6205153862853)</u>	\$	<u>29,093.04</u>
<u>Navy Federal Credit Union (Note - 4300158558572)</u>	\$	<u>27,937.00</u>
<u>Wells Fargo</u>	\$	<u>37,800.00</u>
<u>OneMain Financial</u>	\$	<u>19,862.44</u>

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Mariner Finance

\$ 4,397.00

Westgate Resorts/Westgate Vacation Villas LLC (Notes - 74395623098-000 & 51098183331-000)

\$ 58,079.00

Department of Education/Sallie Mae/Navient/Nelnet/FedLoan/Mohela

\$ 215,000.00

Secretary of the Housing and Urban Development (HUD) (PCD/Note - 1469369647)

\$ 15,741.65

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☒ No☐ Yes. List each

account separately. Type of account:

Institution name:

\$

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes.....

Institution name or individual:

\$

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes..... Issuer name and description:

\$

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\$

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit☐ No☒ Yes. Give specific

information about them

Antonia Holmes Revocable Trust, Antonia Holmes Living Trust, Holmes-Carter Living Trust. Contingent interest in the listed Trusts; no current distributions or control.

\$ 475,000.00

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☐ No☒ Yes. Give specific

information about them

TheRujalanGroup.com domain

\$ 99.00

Debtor 1 **ANTONICIA****HOLMES**

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27. Licenses, franchises, and other general intangibles*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☐ No☒ Yes. Give specific information about them

Comptia Security+CE Certification

\$ 250.00

Money or property owed to you?**Current value of the portion you own?**
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: \$

State: \$

Local: \$

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information.

Alimony: \$

Maintenance: \$

Support: \$

Divorce Settlement: \$

Property Settlement: \$

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information.

\$

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Liberty Mutual

ANTONICIA HOLMES

\$ 500.00

Boston Mutual

ANTONICIA HOLMES

\$ 1,073.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.

\$

Debtor 1 ANTONICIA

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33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples: Accidents, employment disputes, insurance claims, or rights to sue*☒ No☐ Yes. Give specific information.

\$ _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims☐ No☒ Yes. Give specific information.

Notice of Interest & Equitable personal injury Claim filed into case C-08-CV-24-000753, claiming an equitable and beneficial interest in the property known as 6008 Suzanne Road, Waldorf, Maryland 20601, currently titled under the Antonicia Holmes Revocable Trust. Also, NOI & Equitable personal injury Claim to be soon filed against Westgate Resorts, Capital One, NFCU for the subject properties to be titled under the Antonicia Holmes Living Trust.

\$ 806,030.00

35. Any financial assets you did not already list☒ No☐ Yes. Give specific information.

\$ _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here →

\$ 2,256,811.78

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

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First Name

Middle Name

Last Name

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☐ No
☐ Yes. Describe

\$ _____

39. Office equipment, furnishings, and supplies*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☐ No
☐ Yes. Describe

\$ _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☐ No
☐ Yes. Describe

\$ _____

41. Inventory

- ☐ No
☐ Yes. Describe

\$ _____

42. Interests in partnerships or joint ventures

- ☐ No
☐ Yes. Describe Name of entity:

% of ownership:

0 %

\$ _____

43. Customer lists, mailing lists, or other compilations

- ☐ No
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☐ No☐ Yes. Describe

\$ _____

44. Any business-related property you did not already list

- ☐ No
☐ Yes. Give specific information

\$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

\$ 0.00

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

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First Name

Middle Name

Last Name

Part 6:

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

**Current value of the
portion you own?**
Do not deduct secured claims
or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☐ No
☐ Yes

\$ _____

48. Crops—either growing or harvested

- ☐ No
☐ Yes. Give specific
information

\$ _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☐ No
☐ Yes

\$ _____

50. Farm and fishing supplies, chemicals, and feed

- ☐ No
☐ Yes

\$ _____

51. Any farm- and commercial fishing-related property you did not already list

- ☐ No
☐ Yes. Give specific
information

\$ _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here



\$ _____

Debtor 1 ANTONICIA

HOLMES

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First Name

Middle Name

Last Name

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No☐ Yes. Give specific information

\$ _____

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$ 0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 →

\$ 749,000.00

56. Part 2: Total vehicles, line 5 \$ 16,100.00

57. Part 3: Total personal and household items, line 15 \$ 8,850.00

58. Part 4: Total financial assets, line 36 \$ 2,256,811.78

59. Part 5: Total business-related property, line 45 \$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$

61. Part 7: Total other property not listed, line 54 +\$ 0.00

62. Total personal property. Add lines 56 through 61.

\$ 2,281,761.78

Copy personal property total →

+\$ 2,281,761.78

63. Total of all property on Schedule A/B. Add line 55 + line 62.

\$ 3,030,761.78

Fill in this information to identify your case:

Debtor 1 **ANTONICIA** **HOLMES**
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) _____
 First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Maryland

Case number 25-14985
 (If known)

☒ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own?	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
Brief description: 2016 Honda Civic Line from <i>Schedule A/B</i> : 3.1	\$ 7,800.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4);
Brief description: 2018 Chevy Cruze HB Line from <i>Schedule A/B</i> : 3.2	\$ 5,400.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4);
Brief description: 2010 Ford Focus Line from <i>Schedule A/B</i> : 3.3	\$ 2,900.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4);
Brief description: Living Room set (2), Dining Room set (1), Bedroom Furniture (3), Beds (3), Dishes, Silverware set (1)	\$ 7,000.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4);

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own?	Amount of the exemption you claim	Specific laws that allow exemption
Line from Schedule A/B: 6	Copy the value from Schedule A/B	Check only one box for each exemption.	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: Everyday Clothes, everyday shoes, accessories Line from Schedule A/B: 11	\$ 1,000.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: Printer (2), Laptop (1), Television (5), Cellphone (1) Line from Schedule A/B: 7	\$ 850.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: Liberty MutualANTONICIA HOLMES Line from Schedule A/B: 31.1	\$ 500.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: Boston MutualANTONICIA HOLMES Line from Schedule A/B: 31.2	\$ 1,073.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: 6008 SUZANNE ROAD, WALDORF, MD 20601-3201 Line from Schedule A/B: 1.1	\$ 475,000.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11- 504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Tax-Prop. § 14-811(c).
Brief description: Westgate Vacation Villas Resort, 7700 Westgate Blvd, Kissimmee, FL 34747 Line from Schedule A/B: 1.2	\$ 274,000.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11- 504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Tax-Prop. § 14-811(c).
Brief description: Antonicia Holmes Revocable Trust, Antonicia Holmes Living Trust, Holmes-Carter Living Trust. Contingent interest in the listed Trusts;	\$ 475,000.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11- 504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. §

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own?	Amount of the exemption you claim	Specific laws that allow exemption
no current distributions or control.	Copy the value from Schedule A/B	Check only one box for each exemption.	11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h); Md. Code Ann., Tax-Prop. § 14-811(c).
Line from Schedule A/B: 25			
Brief description: Department of Education/Sallie Mae/Navient/Nelnet/FedLoan/Mohela	\$ 215,000.00	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Line from Schedule A/B: 20.8			
Brief description: Notice of Interest & Equitable personal injury Claim filed into case C-08-CV-24-000753, claiming an equitable and beneficial interest in the property known as 6008 Suzanne Road, Waldorf, Maryland 20601, currently titled under the Antonicia Holmes Revocable Trust. Also, NOI & Equitable personal injury Claim to be soon filed against Westgate Resorts, Capital One, NFCU for the subject properties to be titled under the Antonicia Holmes Living Trust.	\$ 806,030.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Tax-Prop. § 14-811(c).
Line from Schedule A/B: 34			
Brief description: First Home Mortgage Corp., Security Instrument (Note) - (MINS 1000915-0000242402-3)	\$ 565,741.65	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h); Md. Code Ann., Tax-Prop. § 14-811(c).
Line from Schedule A/B: 20.1			
Brief description: Capital One Auto Finance (Note -6205153862853)	\$ 29,093.04	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Line from Schedule A/B: 20.2			
Brief description: Navy Federal Credit Union (Note - 4300158558572)	\$ 27,937.00	<input type="checkbox"/> \$ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own?	Amount of the exemption you claim	Specific laws that allow exemption
Line from Schedule A/B: <u>20.3</u>	Copy the value from Schedule A/B	Check only one box for each exemption.	504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: <u>Checking Account Charles Schwab</u> Line from Schedule A/B: <u>17.2</u>	\$ <u>25.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: <u>Checking Account Relay Financial</u> Line from Schedule A/B: <u>17.1</u>	\$ <u>31.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: <u>Checking Account Sutton Bank / Cashapp</u> Line from Schedule A/B: <u>17.3</u>	\$ <u>52.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: <u>Wells Fargo</u> Line from Schedule A/B: <u>20.4</u>	\$ <u>37,800.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: <u>OneMain Financial</u> Line from Schedule A/B: <u>20.5</u>	\$ <u>19,862.44</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: <u>The Rujalan Group, LLC</u> Line from Schedule A/B: <u>19.1</u>	\$ <u>100.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own?	Amount of the exemption you claim	Specific laws that allow exemption
Brief description: Mariner Finance Line from Schedule A/B: 20.6	Copy the value from Schedule A/B \$ 4,397.00	Check only one box for each exemption. <input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: TheRujalanGroup.com domain Line from Schedule A/B: 26	\$ 99.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h).
Brief description: Employment/Personal Injury - Antonicia Holmes vs Paragon Case 18-042-P(CN). Line from Schedule A/B: 33	\$ 325,000.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2). Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(7).
Brief description: Comptia Security+CE Certification Line from Schedule A/B: 27	\$ 250.00	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4); Maryland Code – Courts and Judicial Proceedings § 11-504(b)(5); Md. Code Ann., Cts. & Jud. Proc. § 11-504(h); Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2).

3. **Are you claiming a homestead exemption of more than \$214,000?**
 (Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

Fill in this information to identify your case:

Debtor 1 **ANTONICIA** **HOLMES**
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) _____
 First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Maryland

Case number 25-14985
 (If known)

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
--	--	--

2.4 CAPITAL ONE AUTO FINANCE Describe the property that secures the claim: \$ 9,850.00 \$ 7,800.00 \$ 2,050.00

Creditor's Name
 7933 Preston Rd
 Number Street

2016 HONDA ACCORD, RED; VIN
 2HGFC2F50GH555764

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Date debt was incurred 10/31/2019 Last 4 digits of account number 2853

2.1 FIRST HOME MORTGAGE Describe the property that secures the claim: \$ 304,825.00 \$ 475,000.00 \$

Creditor's Name
 6211 Greenleigh Ave
 Number Street

6008 Suzanne Rd, Waldorf, MD 20601. APN#
 08037426;

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Debtor 1 **ANTONICIA** **HOLMES**
 First Name Middle Name Last Name

Case number (if known)

25-14985

Part 1:**Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A
Amount of claim
 Do not deduct the
 value of collateral.

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
 If any

Date debt was incurred 07/24/2020

Last 4 digits of account number 4915

2.5

NAVY FEDERAL CREDIT UNION

Describe the property that secures the claim:

\$ 18,841.00 \$ 5,400.00 \$ 13,441.00

Creditor's Name

2018 Chevy Cruze HB, Red; VIN
3G1BE6SM5JS601601

P.O. BOX 3700

Number Street

As of the date you file, the claim is: Check all that apply.

Merrifield VA 22119
City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or
secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

☐ Check if this claim is for a
community debt

Date debt was incurred 05/30/2023

Last 4 digits of account number 5725

2.2

WESTGATE VACATION VILLAS
RESORT

Describe the property that secures the claim:

\$ 5,373.00 \$ 25,178.00 \$

Creditor's Name

Phase XXIV; PIN: R102527-5451-0001-0010;
7700 Westgate Blvd, Kissimmee, FL 34747

7700 Westgate Blvd

Number Street

As of the date you file, the claim is: Check all that apply.

VVA/01/40/ ODD

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Kissimmee FL 34747
City State ZIP Code

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or
secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

☐ Check if this claim is for a
community debt

Date debt was incurred 07/05/2016

Last 4 digits of account number 2309

2.3

WESTGATE VACATION VILLAS
RESORT

Describe the property that secures the claim:

\$ 17,000.00 \$ 32,901.00 \$

Creditor's Name

Phase XXIV; PIN: R102527-5451-0001-0010;
7700 Westgate Blvd, Kissimmee, FL 34747

7700 Westgate Blvd

Number Street

As of the date you file, the claim is: Check all that apply.

VVA/01/47/ EVEN

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Kissimmee FL 34747
City State ZIP Code

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or
secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 1:**Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A
Amount of claim
 Do not deduct the
 value of collateral.

Column B
Value of collateral
that supports this
claim
Column C
Unsecured
portion
 If any
☐ At least one of the debtors and another☐ Other (including a right to offset)☐ Check if this claim is for a
community debt

Last 4 digits of account number 3331

Date debt was incurred 09/04/2022

Column A dollar value totals from all pages.

\$ 355,889.00

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

3.1

AIS Portfolio Services, LLC

Name

4515 N Santa Fe Ave

Number Street

Oklahoma City

OK

73118

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? 2.4

Last 4 digits of account number 2853

Fill in this information to identify your case:

Debtor 1	ANTONICIA		HOLMES
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of Maryland			
Case number (If known)	25-14985		

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** claims and Part 2 for creditors with **NONPRIORITY** claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

			Total claim	Priority amount	Nonpriority amount
2.1	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number 8757	\$ 3,450.35	\$ 3,450.35	\$
	Number Street	When was the debt incurred? 01/01/2022			
	KANSAS CITY MO 64999-0010 City State ZIP Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	<input type="checkbox"/> Contingent			
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Unliquidated			
	<input type="checkbox"/> Debtor 2 only	<input checked="" type="checkbox"/> Disputed			
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Domestic support obligations			
	<input type="checkbox"/> Check if this claim is for a community debt	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government			
	Is the claim subject to offset?	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Other. Specify			
	<input type="checkbox"/> Yes				

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: List ALL of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.☒ Yes**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

				Total claim
4.4	Capital One Bank USA Nonpriority Creditor's Name P.O. BOX 31293 Number Street Salt Lake City UT 84131-1293 City State ZIP Code	Last 4 digits of account number 1229		\$ 3,027.00
	When was the debt incurred? 07/15/2014			
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		
4.5	Capital One Bank USA Nonpriority Creditor's Name P.O. BOX 31293 Number Street Salt Lake City UT 84131-1293 City State ZIP Code	Last 4 digits of account number 1768		\$ 1,228.00
	When was the debt incurred? 07/17/2013			
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		
4.26	Central Violations Bureau (CVB) Nonpriority Creditor's Name P.O. BOX 780549 Number Street San Antonio TX 78278-0549 City State ZIP Code	Last 4 digits of account number 8601		\$ 125.00
	When was the debt incurred? 02/13/2024			
	As of the date you file, the claim is: Check all that apply			

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Traffic Citation No. E1968601

4.27

Central Violations Bureau (CVB)

Nonpriority Creditor's Name

P.O. BOX 780549

Number Street

Last 4 digits of account number 8602

\$ 110.00

When was the debt incurred? 02/13/2024

San Antonio

TX

78278-0549

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Traffic Citation No. E1968602

4.21

Charles County Maryland

Nonpriority Creditor's Name

School Bus Safety Program

Number Street

P.O. BOX 411472

Last 4 digits of account number 5297

\$ 292.50

When was the debt incurred? 11/15/2024

Boston

MA

02241-1472

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Citation No. CR-3445297

4.17

Charles County Water & Sewer

Nonpriority Creditor's Name

Last 4 digits of account number 1358

\$ 195.76

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

200 Baltimore Street

Number Street

P.O. BOX 1630

LaPlata

MD

20646-1630

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? 05/19/2025

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Water and Sewer Bill

4.12

CITIBANK - HOME DEPOT

Nonpriority Creditor's Name

P.O. BOX 6045

Number Street

Sioux Falls

SD

57117-6405

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 5181

\$ 2,400.00

When was the debt incurred? 09/2020

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Credit Card

4.30

CITY OF SEAT PLEASANT

Nonpriority Creditor's Name

P.O. BOX 17475

Number Street

Baltimore

MD

21297-1475

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

Last 4 digits of account number 0395

\$ 75.00

When was the debt incurred? 08/01/2024

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim☐ Yes

Camera Citation No. SP41750395

4.9

CREDIT ONE BANK

Nonpriority Creditor's Name

P.O.BOX 60500

Number Street

Last 4 digits of account number 7444

\$ 1,817.34

When was the debt incurred? 11/2021

City of Industry

CA

91716-0500

City

State

ZIP Code

Who incurred the debt? Check one.

☒

Debtor 1 only

☐

Debtor 2 only

☐

Debtor 1 and Debtor 2 only

☐

At least one of the debtors and another

☐

Check if this claim is for a community debt

Is the claim subject to offset?

☒

No

☐

Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Credit Card

4.14

Dept of ED / NELNET/ NAVIENT /FEDLOAN

Nonpriority Creditor's Name

121 S 13TH ST

Number Street

STE 301

Lincoln

NE

68508

City

State

ZIP Code

Who incurred the debt? Check one.

☒

Debtor 1 only

☐

Debtor 2 only

☐

Debtor 1 and Debtor 2 only

☐

At least one of the debtors and another

☐

Check if this claim is for a community debt

Is the claim subject to offset?

☒

No

☐

Yes

Last 4 digits of account number 1858

\$ 184,000.00

When was the debt incurred? 11/05/2015

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

4.24

District Court for Prince George's County

Nonpriority Creditor's Name

Traffic Adjudication

Number Street

14735 Main Street, Ste. 173B

Upper Marlboro

MD

20772-3042

City

State

ZIP Code

Who incurred the debt? Check one.

☒

Debtor 1 only

☐

Debtor 2 only

☐

Debtor 1 and Debtor 2 only

☐

At least one of the debtors and another

Last 4 digits of account number 0SR2

\$ 160.00

When was the debt incurred? 11/16/2023

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Traffic Citation #SZW0SR2

4.25

District Court for Prince George's County

Nonpriority Creditor's Name

Traffic Adjudication

Number Street

14735 Main Street, Ste. 173B

Upper Marlboro

MD

20772-3042

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0SR2

\$ 90.00

When was the debt incurred? 11/16/2023

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Traffic Citation #SZX0SR2

4.22

DISTRICT OF COLUMBIA

Nonpriority Creditor's Name

ADJUDICATION SERVICES

Number Street

P.O. BOX 37135

Washington DC

DC

20013

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 0407

\$ 200.00

When was the debt incurred? 03/27/2025

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Citation No. D053530407

4.10

ELASTIC FINANCE

Nonpriority Creditor's Name

REPULIC BANK & TRUST COMPANY

Number Street

P.O.BOX 950276

Louisville

KY

40295-0276

City

State

ZIP Code

Who incurred the debt? Check one.

Last 4 digits of account number 6765

\$ 4,290.00

When was the debt incurred? 05/08/2017

As of the date you file, the claim is: Check all that apply

☐ Contingent

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

- ☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Consumer Loan

4.31

EMPOWER FINANCE, INC

Nonpriority Creditor's Name

9169 W State St #499

Number Street

Garden City

City

ID

State

83714

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 8757

\$ 360.50

When was the debt incurred? 04/28/2025

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

CASH ADVANCE SERVICE APP

4.23

EXPRESS LANES /

Nonpriority Creditor's Name

Transurban (USA) Operations Inc.

Number Street

P.O. BOX 23530

Alexandria

City

VA

State

22304

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 7854

\$ 22.15

When was the debt incurred? 5/23/2025

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Express Lanes Toll Invoice

4.8

FIRST SAVINGS-BLAZE

Nonpriority Creditor's Name

1500 Highline Ave

Number Street

Last 4 digits of account number 2401

\$ 811.00

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

When was the debt incurred? 06/23/2015

Sioux Falls SD 57108
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

4.19 HARRIS & HARRIS DC

Nonpriority Creditor's Name

P.O. Box 96934

Number Street

Last 4 digits of account number 459A

\$ 1,920.00

When was the debt incurred? 10/21/2023

Washington DC DC 20090
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Tickets: 6826-A \$360; 9860-A \$240; 0459-A \$120;
 0943-A \$0943; 5864-A \$240; 4721-A \$240; 5816-A
 \$240; 7703-A \$240

4.11 Layma, LLC dba Little Lake Lending

Nonpriority Creditor's Name

2770 Mission Rancheria Rd.

Number Street

#393

Lakeport CA 95453
City State ZIP Code

Last 4 digits of account number 35YL

\$ 2,131.00

When was the debt incurred? 10/09/2024

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debtor 1 **ANTONICIA****HOLMES**

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

Is the claim subject to offset?

- ☒ No
☐ Yes

- ☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Loan

4.13

LIBERTY MUTUAL

Nonpriority Creditor's Name

Last 4 digits of account number 4036\$ 1,415.00

175 BERKELEY STREET

Number Street

When was the debt incurred? 11/01/2023

Boston

City

MA

State

02116

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

AUTO INSURANCE

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.3

Mariner Finance

Nonpriority Creditor's Name

Last 4 digits of account number 3212\$ 2,839.00

8211 TOWN CENTER DRIVE

Number Street

When was the debt incurred? 05/26/2023

Baltimore

City

MD

State

21236

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Consumer Loan

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.28

Maryland Department of Transportation (MDOT)

Nonpriority Creditor's Name

Last 4 digits of account number 5297\$ 30.00

6601 Ritchie Hwy, NE

Number Street

When was the debt incurred? 02/26/2025

Attn Admin Flag Unit / Rm 47B

Glen Burnie

City

MD

State

21062

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated

Who incurred the debt? Check one.

- ☒ Debtor 1 only

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify

Flag for Citation No. CR-3445297

4.29

Maryland Department of Transportation (MDOT)

Nonpriority Creditor's Name

6601 Ritchie Hwy, NE

Number Street

Attn Admin Flag Unit / Rm 47B

Glen Burnie

MD

21062

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number 0395

\$ 30.00

When was the debt incurred? 09/23/2024

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify

Flag Fee for Citation No. SP41750395

4.7

MERRICK BANK

Nonpriority Creditor's Name

PO Box 9201 10705 S Jordan Gtwy

Number Street

Ste 20

Old Bethpage

NY

11804-9001

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number 4077

\$ 2,247.00

When was the debt incurred? 07/17/2013

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify

Credit Card

4.15

MOHELA / NAVIENT

Nonpriority Creditor's Name

P.O. BOX 9500

Number Street

Last 4 digits of account number 1370

\$ 30,392.00

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

When was the debt incurred? 09/27/2005

Wilkes-Barre

PA

18773-9500

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.6

NAVY FEDERAL CREDIT UNION

Last 4 digits of account number 9642

\$ 2,903.00

Nonpriority Creditor's Name

P.O. BOX 3700

When was the debt incurred? 08/14/2016

Number Street

Merrifield

VA

22119

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Credit Card

4.1

ONEMAIN

Last 4 digits of account number 5318

\$ 9,026.85

Nonpriority Creditor's Name

601 NW 2ND St

When was the debt incurred? 04/06/2023

Number Street

Evansville

IN

47706-1010

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

☐ Yes

Consumer Loan

4.16

SMECO

Nonpriority Creditor's Name

Last 4 digits of account number 0929

\$ 2,980.54

P.O. BOX 1937

When was the debt incurred? 05/30/2025

Number Street

Hughesville

MD

20637-1937

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Electric Utility Bill

Is the claim subject to offset?

☒ No☐ Yes

4.20

SNAP FINANCE / SNAP RTO LLC

Nonpriority Creditor's Name

Last 4 digits of account number 6XMD

\$ 7,819.48

P.O. BOX 26561

When was the debt incurred? 01/24/2025

Number Street

Salt Lake City

UT

84126

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Consumer Loan

Is the claim subject to offset?

☒ No☐ Yes

4.18

VERIZON FIOS

Nonpriority Creditor's Name

Last 4 digits of account number 0142

\$ 645.23

P.O. BOX 16801

When was the debt incurred? 04/11/2025

Number Street

Newark

NJ

07101-6801

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4., followed by 4.5, and so forth.

Total claim

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Cable Bill

4.2

WELLS FARGO BANK, NA

Nonpriority Creditor's Name

Last 4 digits of account number XXXX

\$ 17,479.00

P.O. BOX 71092

When was the debt incurred? 10/06/2022

Number Street

Charlotte

NC

28272

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Consumer Loan

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

CREDIT COLLECTIONS SERV

Name

725 CANTON ST

Number Street

Norwood

City

MA

State

02062-2679

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4036

SPRING OAKS CAPITAL

Name

1400 CROSSWAYS BLVD

Number Street

STE 100b

Chesapeake

City

VA

State

23320

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6765

CARSON SMITHFIELD

Name

P.O. BOX 9216

Number Street

Old Bethpage

City

NY

State

11804-9216

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4077

CONSERVE /

Name

Continental Service Group, LLC

Number Street

P.O. BOX 9

Fairport

City

NY

State

14450-0009

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.1 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6492

RGS FINANCIAL, LLC

Name

1700 Jay Ell Drive

Number Street

Richardson

City

TX

State

75081

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2401

Asset Recovery Solutions, LLC

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

5250 Old Orchard Rd

Number Street

Suite 200

Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Skokie

IL

60077

Last 4 digits of account number 1229

City

State

ZIP Code

Asset Recovery Solutions, LLC

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

5250 Old Orchard Rd

Number Street

Suite 200

Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Skokie

IL

60077

Last 4 digits of account number 1768

City

State

ZIP Code

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim**Total claims from Part 1**

6a. Domestic support obligations

6a.

\$ 0.00

6b. Taxes and certain other debts you owe the government

6b.

\$ 3,450.35

6c. Claims for death or personal injury while you were intoxicated

6c.

\$ 0.00

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d.

+ \$ 0.00

6e. Total. Add lines 6a through 6d.

6e.

\$ 3,450.35

Total claim**Total claims from Part 2**

6f. Student loans

6f.

\$ 214,392.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g.

\$ 0.00

6h. Debts to pension or profit-sharing plans, and other similar debts

6h.

\$ 0.00

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i.

+ \$ 66,670.35

6j. Total. Add lines 6f through 6i.

6j.

\$ 281,062.35

Fill in this information to identify your case:

Debtor 1	ANTONICIA		HOLMES
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of Maryland			
Case number (If known)	25-14985		

Check if this is:

☒ An amended filing☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies

Employment Status

☐ Employed
☒ Not employed

☐ Employed
☐ Not employed

Occupation**Employer's name****Employer's address**

Number Street

Number Street

City State Zip Code

City State Zip Code

How long employed there?

Debtor 1 **ANTONICIA** **HOLMES**
 First Name Middle Name Last Name

Case number (if known) 25-14985**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 0.00	\$
3. Estimate and list monthly overtime pay.	3. + \$ 0.00	+ \$
4. Calculate gross income. Add line 2 + line 3.	4. \$ 0.00	\$
Copy line 4 here →	4. \$ 0.00	\$
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$
5e. Insurance	5e. \$ 0.00	\$
5f. Domestic support obligations	5f. \$ 0.00	\$
5g. Union dues	5g. \$ 0.00	\$
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$
	5h. + \$	+ \$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 0.00	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$
8. List all other income regularly received:		
8a. Net income from rental property and from operating business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$
8b. Interest and dividends	8b. \$ 0.00	\$
8c. Family support payment that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$
8d. Unemployment compensation	8d. \$ 0.00	\$

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
8e. Social Security	8e. \$ 0.00	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		
Specify: _____	8f. \$ 536.00	\$
_____	8f. \$	\$
8g. Pension or retirement income	8g. \$ 0.00	\$
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$
_____	8h. + \$	+ \$
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 536.00	\$
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 536.00 +	\$ = \$ 536.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: Contributions from my dependent son's monthly SSI payments. Monthly contributions from adult daughter to assist with household bills (e.g., utilities, food, rent)	11. + \$ 900.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. \$ 1,436.00	
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes. Explain: I expect an increase in income this year. I am applying for unemployment benefits. But I am currently looking for new employment and should be re-employed by the end of the year.		

Fill in this information to identify your case:

Debtor 1 ANTONICIA HOLMES
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) _____
 First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Maryland

Case number 25-14985
 (If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

☐ No☒ Yes. Fill out this information for each dependent

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

HARU CARTER IV34
☐ No
☒ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☐ No☒ Yes**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ _____

If not included in line 4:

4a. Real estate taxes

4a. \$ 3,900.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 3,300.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ _____

4d. Homeowner's association or condominium dues

4d. \$ _____

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ _____

6. Utilities:

6a. Electricity, heat, natural gas

6a. \$ 260.00

Debtor 1 ANTONICIA

HOLMES

Case number (if known)

25-14985

First Name

Middle Name

Last Name

Your expenses

6b. Water, sewer, garbage collection	6b. \$	60.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	107.00
6d. Other Specify: _____	6d. \$	_____
7. Food and housekeeping supplies	7. \$	500.00
8. Childcare and children's education costs	8. \$	_____
9. Clothing, laundry, and dry cleaning	9. \$	_____
10. Personal care products and services	10. \$	50.00
11. Medical and dental expenses	11. \$	_____
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	100.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	_____
14. Charitable contributions and religious donations	14. \$	_____
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20		
15a. Life insurance	15a. \$	_____
15b. Health insurance	15b. \$	_____
15c. Vehicle insurance	15c. \$	_____
15d. Other. Specify: _____	15d. \$	_____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$	_____
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	362.00
17b. Car payments for Vehicle 2	17b. \$	404.00
17c. Other. Specify: _____	17c. \$	_____
17d. Other. Specify: _____	17d. \$	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I</i> , Your Income (Official Form 106I).	18. \$	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$	_____
20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> .		
20a. Mortgages on other property	20a. \$	209.00
20b. Real estate taxes	20b. \$	_____
20c. Property, homeowner's, or renter's insurance	20c. \$	_____

Debtor 1 ANTONICIA HOLMES
 First Name Middle Name Last Name

Case number (if known) 25-14985

Your expenses

20d. Maintenance, repair, and upkeep expenses	20d. \$ 90.00
20e. Homeowner's association or condominium dues	20e. \$
21. Other. Specify: Timeshare monthly payment and bi-annual maintenance fees broken down to monthly cost amount.	21. +\$
22. Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. \$ 9,342.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. \$
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. \$ 9,342.00
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 1,436.00
23b. Copy your monthly expenses from line 22c above.	23b. -\$ 9,342.00
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ 0.00
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input type="checkbox"/> No.	
<input checked="" type="checkbox"/> Yes. Explain here:	
I expect my Mortgage payments to decrease after settlement of case. Also, Homeowners insurance will no longer be required and utility bills should decrease.	

Fill in this information to identify your case:

Debtor 1	ANTONICIA		HOLMES
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of Maryland			
Case number (If known)	25-14985		

☒ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

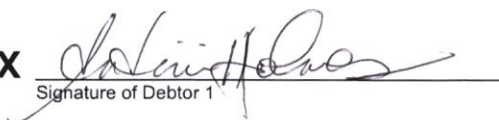
☐ Yes.

Name of person _____

. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X


Signature of Debtor 1

Date 06/17/2025

MM / DD / YYYY

X

Signature of Debtor 2

Date _____

MM / DD / YYYY